NOTARY PUBLIC COMPLAINT FORM

INSTRUCTIONS

Please complete this form and submit to the following address:

Delaware Secretary of State Attn: Notary Public Administrator 401 Federal St., Suite 4 Dover, DE 19901

IMPORTANT: You must include copies of any documents supporting your complaint. Fields marked with ** are required in order to accept your complaint.

Your Information:				
**First Name:	**Last Nan	**Last Name:		
**Street Address **City:	**Stat	te	**Zip:	
**Phone Email	Fax			
**Name of Notary About Whom You Are Complaining				
Please describe your complaint below. If you need more space you may attach additional pages.				